



# HINDS COMMUNITY COLLEGE

## GED TUITION AWARD AND SCHOLARSHIP APPLICATION

### GED Tuition Award:

All GED recipients are eligible for one free three-semester hour credit class. To qualify, the applicant must meet the following criteria:

1. First-time college student
2. Be 18 years of age or older
3. Be a legal resident of the state of Mississippi

### GED Scholarship:

Students who earn a GED battery average of 577 or higher are awarded a half-time scholarship for one semester covering a maximum of 6 semester hours or a half tuition scholarship for full-time students. This scholarship covers tuition only AND is renewable for up to 4 semesters if the student maintains a 2.5 GPA.

1. First-time college student
2. Be 18 years of age or older
3. Be a legal resident of the state of Mississippi

**All applicants must meet general admission requirements for Hinds Community College and complete the Application for GED Tuition Award or Scholarship. Scholarships are awarded up to the first day of class.**

### SCHOLARSHIP APPLICATION

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Last First Middle Initial

Mailing Address \_\_\_\_\_  
Street

City State Zip

Telephone \_\_\_\_\_ Date of Birth \_\_\_\_\_

Today's Date \_\_\_\_\_ Application for \_\_\_\_\_, \_\_\_\_\_  
Semester Year

If you took the GED under another name than your current name, print that name: \_\_\_\_\_

Campus (check one)

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Jackson Campus - Academic/Technical Center    | <input type="checkbox"/> Rankin Campus  | <input type="checkbox"/> Utica Campus            |
| <input type="checkbox"/> Jackson Campus - Nursing/Allied Health Center | <input type="checkbox"/> Raymond Campus | <input type="checkbox"/> Vicksburg-Warren Campus |

**Return completed GED Scholarship Form and Application for Admission to: District Admissions Office  
Hinds Community College  
P.O. Box 1100 • Raymond, MS 39154**

I give Hinds Community College permission to request documents necessary to verify the contents of this application. I also understand that falsification of information is a basis for denying admission or for immediate termination of enrollment.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

*Unsigned Applications Will Not Be Processed.*

The District Admissions Office will send this completed application form to the Financial Aid Office to fill in the following information:

ADMISSIONS OFFICE USE ONLY: Verification of Scholarship	
GED Battery Average* _____	Registrar _____
<i>*Please attach a copy of your GED Transcript if you did not test in Mississippi.</i>	

FINANCIAL AID OFFICE USE ONLY: Verification of Scholarship	
Semester Scholarship Amount _____	Semester (Fall, Spring or Summer), Year _____
Verified By _____	Date _____